

In the claims:

1. (Previously Presented) A system for accessing a surgical target site, comprising:

a handle assembly including a first arm member, a second arm member hingedly attached to said first arm member, and a translating member adapted to move longitudinally relative said first and second arm members;

a first retractor blade rigidly coupled to said first arm member prior to introduction into said surgical target site, a second retractor blade rigidly coupled to said second arm member prior to introduction into said surgical target site, and a third retractor blade rigidly coupled to said translating member prior to introduction into said surgical target site;

said handle being configured to simultaneously introduce said first, second and third retractor blades to said surgical target site in a closed position and thereafter opened by manually squeezing said first and second arm members relative to one another to create an operative corridor to said surgical target site.

2. (Previously Presented) The system of claim 1, further comprising a K-wire configured to be initially advanced to said surgical target site, at least one generally cylindrical dilator configured to be slideably passed over said K-wire and secondarily advanced to said surgical target site, said at least one generally cylindrical dilator having an outer diameter slightly smaller than an inner diameter of said first, second and third retractor blades while in said closed position.

3. (Previously Presented) The system of claim 1 and further, comprising at least one shim element capable of being detachably engaged with at least one of said first, second and third retractor blades, said shim element having an extension of sufficient length to extend past a distal end of said at least one of said first, second and third retractor blades into a spinal disc space and of sufficient height to distract vertebral bodies adjacent to said spinal disc space.

4. (Previously Presented) The system of claim 1 and further, comprising at least one retractor extender capable of being detachably engaged with at least one of said first, second and third retractor blades, said retractor extender having a width wider than said at least one of said first,

second and third retractor blade to prevent the ingress of adjacent tissue into said operative corridor after said first, second and third retractor blades have been opened.

5. (Previously Presented) The system of claim 2, wherein at least one of said K-wire, said at least one dilator, and at least one of said first, second and third retractor blades are equipped with at least one stimulation electrode.

6. (Previously Presented) The system of claim 5, further comprising a control unit capable of electrically stimulating said at least one stimulation electrode, sensing a response of a nerve depolarized by said stimulation, determining at least one of proximity and direction between said at least one stimulation electrode and said depolarized nerve based upon the sensed response, and communicating said at least one of proximity and direction to a user.

7. (Original) The system of claim 6, further comprising an electrode configured to sense a neuromuscular response of a muscle coupled to said depolarized nerve, the electrode being operable to send the response to the control unit.

8. (Original) The system of claim 2, wherein said K-wire has a first stimulation electrode at a distal tip of the K-wire.

9. (Original) The system of claim 1, wherein said system for establishing an operative corridor to a surgical target site is configured to access a spinal target site.

10. (Previously Presented) The system of claim 1, wherein said system is configured to establish said operative corridor via a lateral, trans-psoas approach.

11. (Previously Presented) The system of claim 6, further comprising at least one button for initiating the electrical stimulation from said control unit to said at least one stimulation electrode.

12. (Previously Presented) The system of claim 6, wherein the control unit comprises a display operable to display at least one of an electromyographic (EMG) response of said muscle coupled to said depolarized nerve and a stimulation threshold of said depolarized nerve.

13. (Original) The system of claim 6, wherein the control unit comprises a touch-screen display operable to receive commands from a user.

14. (Previously Presented) The system of claim 6, wherein said stimulation electrodes are positioned near a distal end of at least one of said K-wire, said at least one generally cylindrical dilator, and said at least one of said first, second and third retractor blades.

15.- 19. (Cancelled)

20. (New) A surgical retractor system for accessing a surgical target site, comprising:

- a handle assembly including first and second hinged arm members and a translating member adapted to move longitudinally relative said first and second arm members;

- a first retractor blade coupled to said first arm member prior to introduction into said surgical target site, a second retractor blade coupled to said second arm member prior to introduction into said surgical target site, and a third retractor blade coupled to said translating member prior to introduction into said surgical target site, said first, second, and third retractor blades defining a corridor extending from a proximal end of each retractor blade to a distal end of each retractor blade and between said retractor blades;

- said handle being operable to pivot said first arm and said second arm and translate said translating member, thereby increasing the size of the corridor between said retractor blades to provide access said surgical target site.

21. (New) The surgical retractor system of claim 20, wherein an inner surface facing said corridor of at least one of said first retractor blade, said second retractor blade, and said third retractor blade includes a pair of grooves that engage a blade accessory.

22. (New) The surgical retractor system of claim 21, wherein at least one of said grooves is a dove-tail groove.

23. (New) The surgical retractor system of claim 21, wherein said blade accessory slides down said retractor blade within said pair of grooves.

24. (New) The surgical retractor system of claim 20, wherein said blade accessory is a shim element having an extension of sufficient length to extend past a distal end of said retractor blade into a spinal disc space and of sufficient height to distract vertebral bodies adjacent to said spinal disc space.

25. (New) The surgical retractor system of claim 24, wherein said retractor blade is said third blade and said shim fixes the position of said third blade relative to said disc space when said extension is positioned in said spinal disc space.

26. (New) The surgical retractor system of claim 25, wherein said retractor is configured such that said third retractor blade can be fixed prior to enlarging said corridor and said first and second retractor blades move relative to said third retractor blade.

27. (New) The surgical retractor system of claim 20, wherein said blade accessory is a retractor extension.

28. (New) The surgical retractor system of claim 27, wherein said retractor extender has at least one of a width wider than said retractor blade and a length such that a distal end extends beyond said retractor blade when properly positioned to prevent the ingress of adjacent tissue into said corridor after said corridor has been enlarged.

29. (New) The surgical system of claim 27, wherein said a distal end of said retractor extender includes a generally horizontal extension extending away from said corridor when said extender is engaged with said retractor blade.

30. (New) The surgical retractor system of claim 20, further comprising at least one dilator advanceable to said surgical target site prior to said retractor blades and dimensioned to slidably receive said retractor blades thereabout to guide said retractor blades to said surgical target site.

31. (New) The surgical retractor system of claim 20, wherein at least one of said first retractor blade, second retractor blade, and third retractor blade, is equipped to direct light to said surgical target site.

32. (New) The surgical retractor system of claim 31, wherein at least one light cable extends along at least a portion of the length of said retractor blade.

33. (New) The surgical retractor system of claim 30, wherein at least one of said dilator, first retractor blade, second retractor blade, and third retractor blade are equipped with at least one stimulation electrode.